

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box LOCK is OPENED for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: MARICOPA COUNTY JUVENILE COURT - DB - VC# 15734

BOX 3 **OF** 3

Arrival Time: 10:31

Were there ballots to be picked up?

☒ **YES** <If YES, complete lines 1-5

☐ **NO** <If NO, complete lines 2-5

Completed Forms picked up?

☐ **YES** ☒ **NONE**

1) Red Box Seals # 1S22013654 & 1S22013653 <Indicate the seal numbers that were placed on ballot transport box

2) Ballot Box Sealed/Checked on (Date) 11/06/22 **(Time)** 10:56 <Date and time box was sealed/checked

3) Location Staff Member (Signature) _____

4) Transport Staff Member (Signature) [Signature]

5) Transport Staff Member (Signature) [Signature]

Departure Time: 10:59

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) Canon Personke

Sign to acknowledge receipt from Transport Staff Member

Date/Time: 11/6/22 12:10

Date of Audit Match

Ballot Box Seals # 1S22013653 **&** 1S22013654

<If applicable, verify the seal numbers on the box match the above from location

Count of Ballots in Transport Bin # 149

Audit Agent (Signature) [Signature]

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 11-6-22 12:10

Date of Audit Match

